| Date Registration Received by City: |  |  |  |  |  |  |
|-------------------------------------|--|--|--|--|--|--|
|                                     |  |  |  |  |  |  |
|                                     |  |  |  |  |  |  |
|                                     |  |  |  |  |  |  |
|                                     |  |  |  |  |  |  |



123 S Third Street Easton, PA 18042 phone (610) 250-6724 fax (610) 250-6607 e-mail codes@easton-pa.gov

Application is hereby made to the Easton Zoning Administrator for (explain proposal):

|   |                   | _located at                   |  |                           |  |
|---|-------------------|-------------------------------|--|---------------------------|--|
| I hereby certify that I am the legal or equitable information given is true and accurate to the b supplied hereunder shall render this applicatio | est of my know    | ledge. I understan            | d that any misrepresent                |                           |  |
| FEES: Change of Use \$50.00 New Use \$50.00 Home Office \$50.00   |                   |                               | (Signature of Legal o                  | r Equitable Owner)        |  |
| OWNER: name   |                   | APPLICANT:                    | name                                   |                           |  |
| address   |                   |                               | address                                |                           |  |
| -1  |                   |                               |  |                           |  |
| phone   |                   |                               | phone                                  |                           |  |
| Email FO BE COMPLETED BY:   |                   | LICANT                        | ZONING A                               | mail                      |  |
| Required Information  | Existing          | Proposed                      | Required                               | Notes                     |  |
| Lot Width (ft.)   |                   |                               |  |                           |  |
| Lot Depth (ft.)   |                   |                               |  |                           |  |
| Total Lot Area (sq. ft.)  |                   |                               |  |                           |  |
| Total Number of Dwelling Units  |                   |                               |  |                           |  |
| Lot Area per Dwelling   |                   |                               |  |                           |  |
| Principal Use - (If more than one -list sq. ft. for each use)   |                   |                               |  |                           |  |
| Accessory Use - (If more than one -list sq. ft for each use)  |                   |                               |  |                           |  |
| Building Height   |                   |                               |  |                           |  |
| *Impervious Surface Ratio (see below)   |                   |                               |  |                           |  |
| Build To Line   |                   |                               |  |                           |  |
| Width of Narrowest Side Yard (ft.)  |                   |                               |  |                           |  |
| Total Width of Both Side Yards  |                   |                               |  |                           |  |
| Rear Yard Setback   |                   |                               |  |                           |  |
| Distance Between Buildings  |                   |                               |  |                           |  |
| Number of Off-street Parking Spaces   |                   |                               |  |                           |  |
| *Total area covered by structure, patios, drives,   |                   | tal lot area<br>ČE USE ONLY * | •••••••••••••••••••••••••••••••••••••• | • • • • • • • • • • • • • |  |
| DATE REC'D:   | DATE REVI         |                               | REVIEWED BY:                           |                           |  |
| EEE DEC'D.  | A DDD OVED DENIED |                               | REFER TO PLANNING AS                   |                           |  |

| TOR OFFICE USE ONLY TO |  |   |        |  |  |  |  |
|------------------------|--|---|--------|--|--|--|--|
| DATE REC'D:            |  | DATE REVIEWED:  |        | REVIEWED BY:                           |  |  |  |
| FEE REC'D:             |  | APPROVED  | DENIED | REFER TO PLANNING AS SPECIAL EXCEPTION |  |  |  |
| REC'D BY:              |  | Is the existing use a legal non confirming use  Yes  No |        |  |  |  |  |
| PERMIT NO:             |  | COMMENTS:   |        |  |  |  |  |
| ZONING DISTRICT:       |  |   |        |  |  |  |  |